

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW			

### INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 ÷ ..... Restricted      O ..... Objected

Claim	Final	Original	Date
1	✓	✓	6-21-02
2	✓	✓	7-2-02
3	✓	✓	1-27-03
4	✓	✓	
5	✓	✓	
6	✓	0	
7	✓	0	
8	✓	0	
9	✓	0	
10	✓	✓	
11	✓	0	
12	✓	✓	
13	✓	✓	
14	✓	✓	
15	✓	0	
16	✓	0	
17	✓	✓	
18	✓	✓	
19	✓	✓	
20	✓	✓	
21	✓	✓	
22	✓	0	
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If more than 150 claims or 10 actions  
staple additional sheet here

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